

|_|_| SENIOR INSTRUCTOR'S AREA QUESTIONNAIRE NUMBER |_|_|_|_|

|_|_| COUNTY



STATISTIKAAMET

ESTONIAN SOCIAL SURVEY 2005

Household questionnaire

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Survey week |_|_| |_|_| – |_|_| |_|_| |2_|_0_|_0_|_5_|
date month date month year

Code of household |_|_|_|_|_|_|_|_|_|_|

Split number |_|_|

IF |_|_0_|_0_|, THEN WERE THERE SPLIT-OFFS FROM THE INITIAL HOUSEHOLD?
YES |_| NO |_|

Survey area |_|_|_|_| Code of interviewer |_|_|_|

TALLINN 2005

SECTION A. INTERVIEWER'S SECTION

A01	DATE OF INTERVIEW	DATE OF CONTINUATION
A	|_|_| DATE	|_|_| DATE
B	|_|_| MONTH	|_|_| MONTH
A02	STARTING TIME OF THE INTERVIEW	IN CASE OF INTERRUPTION, STARTING TIME OF CONTINUATION
A	|_|_| HOUR	|_|_| HOUR
B	|_|_| MINUTES	|_|_| MINUTES
A03	PLACE OF INTERVIEW 1 RESPONDENT'S PLACE OF RESIDENCE 2 RESPONDENT'S PLACE OF WORK 3 INTERVIEWER'S PLACE OF WORK / PLACE OF RESIDENCE 4 ELSEWHERE (WRITE WHERE)	
A04	HOUSEHOLD'S PLACE OF RESIDENCE <div style="text-align: right;"> _____ VILLAGE / SMALL TOWN |_|_|_|_| _____ CITY / TOWN / RURAL MUNICIPALITY |_|_|_| _____ COUNTY |_|_| </div>	

DEFINITIONS

Household is a group of people who live in a common dwelling (at the same address) and share joint financial and/or food resources. Persons included in the household are members of the household. A household may also consist of one member only.

Temporarily absent means first of all that the person absent will presumably return to the household after the end of the mission, studies, etc. In general, the respondent can decide whether the contact with the person is close enough to consider him or her a member of the household. If the person has started his or her own family and lives permanently separately, then he or she is not considered a member of the respondent household although, for example, he or she may still have his or her own room at his or her parents' house and he or she may receive regular financial help.

Sample household is a household, which contains at least one person who was included in the sample.

Sample person is every member of the sample household born in 1990 or earlier (14-year-olds as at 1 January 2004).

New household member is a household member who has joined the sample person's household after the last interview of the Social Survey.

Guest is a person who does not belong to the household but has spent at least three months in the household during the previous calendar year.

Initial household is a sample household where at least one such sample person belongs to who lives in the same dwelling as at the last survey year. If none of the households where a sample person belongs to lives at the same address, then initial household is the one where household member with the smallest person number belongs.

Split-off household is a new household of the sample person who has left the initial household and started to live separately.

New household is a household, which has been included to the survey from the year 2005.

Code of household is a special identifying code of the household, which is given to the household at inclusion to the survey. The code of household is given to the interviewer to take along on the rotation sheet.

Split number is a two-figure code, which shows the division of the primary household. The split number of the initial household and a new household is 00. Interviewer will give the split number to the split-off household: it is the first vacant split number according to the rotation sheet.

Household member's number is a special identifying code of the person formed according to the fixed regulation, which is attributed to every household member at his or her inclusion to the survey. Household member's number is unique and it consists of three parts: code of household (6 figures) + split number (2 figures) + reference number of the person (2 figures). **Household member's number is unchangeable during the whole survey.**

In case of the known household members, the household member's number is given the interviewer to take along on the rotation sheet from where the interviewer writes the number in section X to the question XX1. In section B, the interviewer writes four last figures of the household member's number of the known members from section X or from the rotation sheet (in case of split-off household). The interviewer gives these four last figures to new members or to the members of new households as follows:

1) to new members

- a) the first two figures: split number – looks from the cover of the household questionnaire;
- b) the next two figures: the first vacant reference number of a household member – looks according to the rotation sheet;

2) to the members of a new household

- a) the first two figures: split number – looks from the cover of the household questionnaire (always 00);
- b) the next two figures: the reference number of a household member – according to the column number (BX1).

The interviewer cannot give the last four figures of the household member's number, if it concerns the person who has participated in the survey last year but has moved to another sample household (new members in the initial or split-off household (BX = 1 or 2 and BA1 = 1) and who participated also last year (BA4 = 1), or a member of a new household (BX = 3) who participated in the survey last year as well (BA4 = 1)). The described situation is exceptional. As a result the interviewer must very thoroughly double-check it.

SECTION X. TRACING





NB! SECTION X IS NOT FILLED IN REGARDING THE SPLIT-OFF OR A NEW HOUSEHOLD (SEE DEFINITION P 3).

WRITE THE DATA FROM THE ROTATION SHEET IN ORDER OF THE REGISTER ABOUT ALL THE (KNOWN) HOUSEHOLD MEMBERS OF THE SURVEYED HOUSEHOLD INTO THE FOLLOWING TABLE. IF THE HOUSEHOLD CONSISTS OF MORE THAN 6 (KNOWN) HOUSEHOLD MEMBERS THEN USE AN ADDITIONAL SHEET. CHECK THE BACKGROUND DATA WITH THE QUESTIONNAIRE.

XX1	Reference number of the household member	1	2	3	4	5	6	
→	WRITE HOUSEHOLD MEMBER'S NUMBER	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
X1	FIRST NAME	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
X2	GENDER: 1 MALE 2 FEMALE	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
X3	DATE OF BIRTH							
A	DATE	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
B	MONTH	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
C	YEAR	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
D	AGE (1 January 2005)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

IF THE PERSONAL DATA DIFFERS SUBSTANTIALLY, IT IS NECESSARY TO ASK WHETHER OR NOT IT IS THE SAME PERSON.

X4	Is ... your household member?							1→X10
↓	1 YES 2 NO	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
	X5 For what reason is he/she not in the household?							
	21 has moved to a separate household							
	23 is dead	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
	24 has left for a long time (more than 6 months) to a collective household or an institutional establishment within the boundaries of a state	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	23, 24, 25, 26 → X7
	25 has headed abroad (for more than 6 months)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
	26 OTHER	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
	[RECORD]	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	


X6 	Indicate ...'s new address? Street, house, apartment Village/small town City/town/rural municipality County Contact telephone							
A	WRITE THE SPLIT NUMBER OF A NEW HOUSEHOLD (THE FIRST VACANT SPLIT NUMBER)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
X7 A B	When did ... leave the household (die)? Month Year	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	
X8	How many months was ... in the household in the previous calendar year?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
X9 	What was the main social status of ... in the previous calendar year? He or she was 1 working 2 unemployed 3 old-age pensioner or received pension for incapacity for work 4 homemaker, on parental leave, conscript, student (pupil) or other	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
X10	INTERVIEWER CHECKPOINT. DOES THE TABLE INCLUDE THE DATA ABOUT ALL THE GIVEN HOUSEHOLD MEMBERS? 1 YES 2 NO	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	2 →X4

SECTION B. GENERAL DATA OF HOUSEHOLD

BX	HOUSEHOLD IS: 1 INITIAL HOUSEHOLD 2 SPLIT-OFF HOUSEHOLD 3 NEW HOUSEHOLD
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WRITE THE DATA ABOUT ALL THE MEMBERS OF THE SURVEYED HOUSEHOLD INTO THE FOLLOWING TABLE. IN CASE OF **INITIAL HOUSEHOLD**, FIRST OF ALL THE KNOWN MEMBERS FROM SECTION X AND AFTER THEM NEW MEMBERS. IN CASE OF **SPLIT-OFF HOUSEHOLD**, WRITE FIRST OF ALL THE KNOWN MEMBERS FROM THE ROTATION SHEET AND THEREAFTER NEW MEMBERS. IN CASE OF **NEW HOUSEHOLD** THE WRITING HAS TO BE STARTED FROM THE REFERENCE PERSON AND CONTINUED IN THE ORDER OF AGE, STARTING FROM THE OLDEST. IF THE HOUSEHOLD CONSISTS OF MORE THAN 6 MEMBERS THEN USE AN ADDITIONAL SHEET. DRAW A CIRCLE AROUND THE NUMBER OF THE LAST PERSON.



BX1	Column number	01	02	03	04	05	06	
→	First name	.....	.....	.....	.....	.....	.....
BA1	IS ... A NEW MEMBER IN THE HOUSEHOLD? 1 YES 2 NO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2→ BA4
BA2 ↓	Was ... born to the household? 1 YES 2 NO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
BA3 A B	Indicate when did ... come to the household? Month Year	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	
BA4	Did ... participate in ESS in March – August 2004? 1 YES 2 NO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	BA4=1 and BX=3 or BA4=1 and BA1=1 →BA6
BA5	4 LAST FIGURES OF THE HOUSEHOLD MEMBER'S NUMBER	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
BA6	INTERVIEWER CHECKPOINT. DOES THE TABLE INCLUDE THE DATA ABOUT ALL PERSONS? 1 YES 2 NO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2→BA1 one member →B02

B01 	What is ...'s relationship to other household members?	→	1	2	3	4	5	6	7	8	9	10	11
		1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	01 Spouse or partner	2		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	02 Child (incl. adopted)	3			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	03 Foster child	4				<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	04 Parent	5					<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	05 Foster parent	6						<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	06 Grandparent / his or her partner	7							<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	07 Grandchild or child (incl. adopted) of the child's partner	8								<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	08 Daughter/son-in-law									<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
09 Mother/father-in-law										<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
10 Other relative											<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	

	11 Non-relative	9																
		10																
		11																
		12																


Now let's talk separately about each member of your household.

↓	Column number	01	02	03	04	05	06	
	First name	.....	.....	.....	.....	.....	.....
B02	What is the gender of ... ? 1 – MALE 2 – FEMALE	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
B03	Indicate the date of birth of ... Date Month Year	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	
B04	Indicate the country of birth of ...	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	 Estonia → B06
B05 A B	From which year has ... lived in Estonia? Year IF FROM 2004 OR 2005 THEN ASK Month	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	
B06 	What is the ethnic nationality of ... ? 01 Estonian 02 Russian 03 Ukrainian 04 Belorussian 05 Finn 06 Jew 07 Tatar 08 German 09 Latvian 10 Pole 11 Lithuanian 12 OTHER. [RECORD] 13 DOES NOT WANT TO ANSWER	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	
B07 	Indicate the citizenship of ... 1 Estonian 2 Russian 3 Ukrainian 4 Belorussian 5 Finnish 6 OTHER. [RECORD] 7 UNSPECIFIED	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	
B07a 	Indicate the second citizenship of... 6 OTHER. [RECORD] 7 THERE IS NO OTHER	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	

B08	Does ... live currently 1 with his or her household? 2 separately? 3 alone?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1 → BP1 3 → BP1
B09 	Why is ... living separately? 1 Studies 2 Work 3 Military service 4 Hospitalisation 5 Imprisonment 6 OTHER. [RECORD]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
BP1	What is the legal marital status of ...? 1 Has never been married 2 Married 3 Divorced 4 Widowed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
BP2	What is the actual marital status of ...? 1 I cohabit 2 I do not cohabit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
BX2 	What was the main social status of ... in the week preceding the survey? He or she was 1 working 2 unemployed 3 old-age pensioner or received pension for incapacity for work 4 homemaker, on parental leave, conscript, student (pupil) or other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
B10	INTERVIEWER CHECKPOINT. DOES THE TABLE INCLUDE THE DATA ABOUT ALL PERSONS? 1 YES 2 NO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2 → B02

The following questions refer to the guests who spent at least three months in your household [SEE DEFINITION P 3].


BK1	Did someone who did not belong to the household spend at least three months in the household in the previous calendar year (i.e. were there any guests)? 1 YES 2 NO → B11						
↓	Reference number of the guest	1	2	3	4	5	6
BK2	First name	.....	.....	.....	.....	.....	.....
BK3	What is the gender of ...? 1 MALE 2 FEMALE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BK4	Indicate the date of birth of						
A	... Date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
B	Month	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
C	Year	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

BK5	Indicate the number of months when ... was in the household in the previous calendar year. Number of months	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
BK6 	Indicate the main social status of ... in the previous calendar year. He or she was 1 working 2 unemployed 3 old-age pensioner or received pension for incapacity for work 4 homemaker, on parental leave, conscript, student (pupil) or other	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
BK7	Where there more guests? 1 YES 2 NO	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	1 → BK2 2 → B11

The following questions refer to the children of your household.








B11	Are there any 0-14-year-old children in your household as at 1 January this year? (born in 1989 or earlier) 1 YES 2 NO → SECTION C
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B12 →	How old was the child on 1 January this year?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
BX3	WRITE THE COLUMN NUMBER OF THE QUESTION BX1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
	First name of the child	.....	.....	.....	.....	.....
B13 ↓	When viewing a typical week of the child, does the child attend a sports club, art club, learns to play some musical instrument or attends any other hobby group (<u>including</u> baby schools, <u>excluding</u> preparatory courses for children of pre-school age)? 1 YES	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
A	Number of hours per week 2 NO	<input type="text"/> hours	<input type="text"/> hours	<input type="text"/> hours	<input type="text"/> hours	<input type="text"/> hours	1 → B15

B17 	When viewing a typical week of the child, how many hours per week do you use the following variants of child care? [WRITE <u>THE NUMBER OF HOURS</u> OF THE VARIANTS OF CHILD CARE USED. WRITE 00 IF YOU DO NOT USE ANY OF THE LISTED VARIANTS OF CHILD CARE]						
A	The child is looked after gratis by grandparents, relatives, acquaintances, neighbours or other at least 15-year-old household members (excl. parents)	<input type="text"/> hours	<input type="text"/> hours	<input type="text"/> hours	<input type="text"/> hours	<input type="text"/> hours	
B	The child is looked after by a paid nanny (either at the nanny's or child's home)	<input type="text"/> hours	<input type="text"/> hours	<input type="text"/> hours	<input type="text"/> hours	<input type="text"/> hours	
C	The child attends a long day or remedial group at school	<input type="text"/> hours	<input type="text"/> hours	<input type="text"/> hours	<input type="text"/> hours	<input type="text"/> hours	
D	The child is in a day centre (paid looking after children outside of home, except when with nanny, in kindergarten, in crèche)	<input type="text"/> hours	<input type="text"/> hours	<input type="text"/> hours	<input type="text"/> hours	<input type="text"/> hours	
E	The child lives in boarding school (including time before and after time of learning until the official time of retiring, excl. time spent in sports or hobby groups)	<input type="text"/> hours	<input type="text"/> hours	<input type="text"/> hours	<input type="text"/> hours	<input type="text"/> hours	
B18	INTERVIEWER CHECKPOINT. DOES THE TABLE INCLUDE DATA ABOUT ALL 0-14-YEAR-OLD CHILDREN? 1 YES 2 NO	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	2 → B13



B19	Does Your household have to pay for child care? <i>NB! Only monetary payments should be taken into account here.</i> 1 YES 2 NO → SECTION C
B20	Please specify the total amount Your household spends on child care in a month? <i>NB! The total amount spent on all children should be taken into account here.</i> Amount per month <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> kroons


SECTION C. LIVING CONDITIONS

C01 	<p>In which type of a residential building is the dwelling of Your household located? <i>Dwelling is a room where you spend most of your free time, incl. sleeping time.</i></p> <table style="width: 100%;"> <tr> <td>1 Farm house</td> <td>5 Apartment or room in a residential building with fewer than 10 dwellings</td> </tr> <tr> <td>2 One-family dwelling</td> <td>6 Apartment or room in a residential building with more than 10 dwellings</td> </tr> <tr> <td>3 Two-family dwelling</td> <td>7 Hostel</td> </tr> <tr> <td>4 Terraced house</td> <td>8 OTHER [RECORD].....</td> </tr> </table>	1 Farm house	5 Apartment or room in a residential building with fewer than 10 dwellings	2 One-family dwelling	6 Apartment or room in a residential building with more than 10 dwellings	3 Two-family dwelling	7 Hostel	4 Terraced house	8 OTHER [RECORD].....												
1 Farm house	5 Apartment or room in a residential building with fewer than 10 dwellings																				
2 One-family dwelling	6 Apartment or room in a residential building with more than 10 dwellings																				
3 Two-family dwelling	7 Hostel																				
4 Terraced house	8 OTHER [RECORD].....																				
C02 	<p>When was the house built?</p> <table style="width: 100%;"> <tr> <td>1 Before 1946</td> <td>5 In 1981–1990</td> </tr> <tr> <td>2 In 1946–1960</td> <td>6 In 1991–1999</td> </tr> <tr> <td>3 In 1961–1970</td> <td>7 In 2000 or later</td> </tr> <tr> <td>4 In 1971–1980</td> <td>8 DO NOT KNOW</td> </tr> </table>	1 Before 1946	5 In 1981–1990	2 In 1946–1960	6 In 1991–1999	3 In 1961–1970	7 In 2000 or later	4 In 1971–1980	8 DO NOT KNOW												
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4 In 1971–1980	8 DO NOT KNOW																				
C03	<p>How many rooms belong to Your household? _ _ , _ </p> <p><i>If several households live in one dwelling and some rooms are in the shared use then divide in your mind the mentioned room into parts and indicate the number of rooms as a decimal. For example, if the household has a bedroom and half of the living room, the number of rooms would be 1.5.</i></p>																				
C03A	<p>How big is the living area at command of Your household in square metres? _ _ _ </p> <p><i>For finding out the useful area count up the area of rooms, kitchen and internal auxiliary rooms of the dwelling. If several households live in Your dwelling then take into account the shared use similarly as at determination of the number of rooms.</i></p>																				
C04 	<p>What kind of a toilet is there in Your dwelling? IN THE CASE OF THE EXISTENCE OF SEVERAL VARIANTS DESIGNATE THE ONE WITH THE SMALLEST REFERENCE NUMBER.</p> <table style="width: 100%;"> <tr> <td>1 There is a flush toilet in the dwelling</td> <td>4 The toilet is outside</td> </tr> <tr> <td>2 The flush toilet is in the shared use in the house</td> <td>5 There is no toilet</td> </tr> <tr> <td colspan="2">3 There is other than flush toilet inside the dwelling or house</td> </tr> </table>	1 There is a flush toilet in the dwelling	4 The toilet is outside	2 The flush toilet is in the shared use in the house	5 There is no toilet	3 There is other than flush toilet inside the dwelling or house															
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C05 	<p>What kinds of washing facilities are there in Your dwelling? IN THE CASE OF THE EXISTENCE OF SEVERAL VARIANTS DESIGNATE THE ONE WITH THE SMALLEST REFERENCE NUMBER.</p> <table style="width: 100%;"> <tr> <td>1 There is a separate bath or shower in the dwelling</td> </tr> <tr> <td>2 Bath or shower is used by several households</td> </tr> <tr> <td>3 It is not possible to use a bath or shower in the dwelling</td> </tr> </table>	1 There is a separate bath or shower in the dwelling	2 Bath or shower is used by several households	3 It is not possible to use a bath or shower in the dwelling																	
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C07 	<p>Does Your dwelling have any of the following problems?</p> <table style="width: 100%;"> <thead> <tr> <th></th> <th style="text-align: center;">YES</th> <th style="text-align: center;">NO</th> </tr> </thead> <tbody> <tr> <td>1 The ceiling leaks</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>2 Damp walls, floor or basement</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>3 Rotten window frames or floor</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>4 Too dark, not enough light</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> </tbody> </table>		YES	NO	1 The ceiling leaks	1	2	2 Damp walls, floor or basement	1	2	3 Rotten window frames or floor	1	2	4 Too dark, not enough light	1	2					
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3 Rotten window frames or floor	1	2																			
4 Too dark, not enough light	1	2																			
C08 	<p>Do You usually hear in your dwelling...?</p> <table style="width: 100%;"> <thead> <tr> <th></th> <th style="text-align: center;">YES, it is a problem</th> <th style="text-align: center;">YES, but it is not a problem</th> <th style="text-align: center;">NO</th> </tr> </thead> <tbody> <tr> <td>1 noise from neighbouring apartments, water pipes, etc.</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> </tr> <tr> <td>2 street or road noise</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> </tr> <tr> <td>3 noise created by planes or railway</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> </tr> <tr> <td>4 industrial or construction noise</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> </tr> </tbody> </table>		YES, it is a problem	YES, but it is not a problem	NO	1 noise from neighbouring apartments, water pipes, etc.	1	2	3	2 street or road noise	1	2	3	3 noise created by planes or railway	1	2	3	4 industrial or construction noise	1	2	3
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C09 	Is there in the vicinity of your dwelling...?	YES, it is a problem	YES, but it is not a problem	NO
	1 road dust, exhaust gases of vehicles	1	2	3
	2 smoke, dust or unpleasant smell from factories	1	2	3
	3 unpleasant smell of wastes or sewerage	1	2	3
C10	In Your opinion, are there problems with crime, violence or vandalism in the vicinity of your dwelling?			
	1 YES 2 NO			


SECTION D. ECONOMIC WELFARE


D01 	What is the tenure status of Your household to the dwelling? 1 Dwelling is owned by the household (member of the household) → D03 2 Dwelling is rented from the state or local government at market price 3 Dwelling is rented from a private person at market price 4 Dwelling is rented below the market price level 5 Dwelling is used free of charge → D04																									
D02	How much do You pay rent monthly on average? <i>(Rent is the amount paid to the owner of the dwelling but excluding payments for public utilities and service charges).</i> RENT MUST BE INDICATED, IF THE DWELLING IS RENTED (D01=2, 3, 4)! Average rent monthly _____ kroons																									
D03 A	Did You receive subsistence benefit in the previous calendar year? 1 YES Total amount received in the previous calendar year _____ kroons 2 NO																									
D04	Indicate Your average monthly housing cost – payments for public utilities, service charges; in the case of tenants, the amounts of rent paid; repayments of housing loans etc. <i>The total expenditure on the dwelling includes payments for public utilities, service charges; in the case of tenants, the amounts of rent paid. At answering there should be originated from the real cost and not taking into account the part left unpaid (debts).</i> Average monthly expenditure on dwelling _____ kroons																									
D05	To which extent does the total expenditure on your dwelling restrict the other expenditure of Your household? 1 Restrict a lot 2 Restrict to a certain extent 3 Does not restrict at all																									
D06 	<table border="1"> <thead> <tr> <th rowspan="2"></th><th colspan="3">Is it in use?</th></tr> <tr> <th>YES</th><th>NO, because I cannot afford it</th><th>I do not use it for another reason</th></tr> </thead> <tbody> <tr> <td>1 Telephone (incl. mobile phone)</td><td>1</td><td>2</td><td>3</td></tr> <tr> <td>2 Colour TV</td><td>1</td><td>2</td><td>3</td></tr> <tr> <td>3 Internet connection at home</td><td>1</td><td>2</td><td>3</td></tr> <tr> <td>4 Washing machine</td><td>1</td><td>2</td><td>3</td></tr> </tbody> </table>				Is it in use?			YES	NO, because I cannot afford it	I do not use it for another reason	1 Telephone (incl. mobile phone)	1	2	3	2 Colour TV	1	2	3	3 Internet connection at home	1	2	3	4 Washing machine	1	2	3
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4 Washing machine	1	2	3																							


	5 Car (incl. car provided by employer for personal use)	1	2	3
	6 Personal computer	1	2	3
D07	Do You or does any of the members of Your household have to pay interests on leasing or loan(s) (incl. credit card interests) or make repayments of loan(s), which are not connected with housing (e.g., study loan, small loan, car leasing, etc.)? 1 YES 2 NO → D09			
D08	To which extent do these interests on leasing or loan(s) (incl. credit card interests) or repayments of loan(s) restrict the other expenditure of Your household? 1 Restrict a lot 2 Restrict to a certain extent 3 Do not restrict at all			
D08A	Do You or any of the members of Your household must pay a housing loan, which is taken for the main dwelling? 1 YES A The paid interests in the previous calendar year |_|_|_|_|_| kroons B The paid repayments of the housing loan in the previous calendar year |_|_|_|_|_| kroons C How many months was the housing loan paid in the previous calendar year |_|_| months 2 NO			
D09	Did You or any of the members of Your household receive income from renting property (e.g., building, residential building, apartment, room or land) in the previous calendar year? <i>NB! The amount received after payments for public utilities, service charges and property management expenses have been deducted.</i> 1 YES A Gross amount received in the previous calendar year |_|_|_|_|_| kroons B Net amount received in the previous calendar year |_|_|_|_|_| kroons 2 NO			
D10	Did You or any of the members of Your household pay land tax or any other payments for property in the previous calendar year? 1 YES A Total amount paid in the previous calendar year |_|_|_|_|_| kroons 2 NO			
D11 	Did You or any of the members of Your household receive child benefits or any other benefits connected with children or family or pregnancy or maternity benefits (child allowance, child care allowance, childbirth allowance, parental wages, pregnancy or maternity benefit, school allowance , etc.) in the previous calendar year? 1 YES B Parental benefit (parental wages) received in the previous calendar year |_|_|_|_|_| kroons C Total amount of other benefits received in the previous calendar year |_|_|_|_|_| kroons 2 NO IF THERE ARE UNDER 20-YEAR-OLD MEMBERS IN THE HOUSEHOLD (SEE B03 – YEAR: BORN IN 1984 AND LATER), THEN DEFINITELY DOUBLE-CHECK.			
D12	Did You or any of the members of Your household receive financial support from nongovernmental organisations or institutions (churches, foundations, private enterprises, etc.) in the previous calendar year? 1 YES A Total amount received in the previous calendar year |_|_|_|_|_| kroons 2 NO			


D13	Did You or any of the members of Your household receive support in kind from nongovernmental organisations or institutions (churches, foundations, funds, private enterprises, etc.) in the previous calendar year?	
A	1 YES Approximate value of the aid received in the previous year	|_|_|_|_|_| kroons
	2 NO	

Next follow some questions concerning monetary transfers and aid in kind, which you have made or provided to persons of other households or received from persons of other households.

D14	Did You or any of the members of Your household make regular payments to someone from another household (e.g., student living separately, allowance to (ex)spouse or children) in the previous calendar year? <i>NB! Single presents, for example, for Christmas or on birthdays should not be taken into account here.</i>	
A	1 YES Total amount paid in the previous calendar year	|_|_|_|_|_| kroons
	2 NO	
D15	Did You or any of the members of Your household provide aid in kind to someone from another household (e.g., baby carriage given to relatives, etc.) in the previous calendar year?	
A	1 YES Approximate value of the aid provided in the previous year	|_|_|_|_|_| kroons
	2 NO	
D16	Did You or any of the members of Your household receive regular payments, incl. support payments (excl. income from rent) from someone from another household in the previous calendar year? <i>NB! Single presents, for example, for Christmas or on birthdays should not be taken into account here.</i>	
A	1 YES Total amount received in the previous calendar year	|_|_|_|_|_| kroons
	2 NO	
D17	Were You or any of the members of Your household provided aid in kind by someone from another household (e.g., baby carriage received from relatives, etc.) in the previous calendar year?	
A	1 YES Approximate value of the aid received in the previous year	|_|_|_|_|_| kroons
	2 NO	
D18	INTERVIEWER CHECKPOINT ARE THERE 15-YEAR-OLD OR YOUNGER CHILDREN IN YOUR HOUSEHOLD?	
	1 YES 2 NO → D20	
D19	Did any of the 15-year-old or younger children receive income from wage labour in the previous calendar year?	
A	1 YES Gross amount received in the previous calendar year	|_|_|_|_|_| kroons
B	Net amount received in the previous calendar year	|_|_|_|_|_| kroons
	2 NO	
D20 	In case of need, can Your household afford the following?	
		YES NO
	1 Most of the household can afford a week-long holiday at their own expense (incl. travel and living expenses) in Estonia or abroad	1 2
	2 Eat meat, chicken or fish (or vegetarian equivalent) at least 3 times a week	1 2
	3 To heat the dwelling sufficiently	1 2

D21 	In case of a sudden need for ... kroons, could Your household get hold of this amount?			
		Yes, without help from others	Maybe, but with the help of others	No, it's impossible
A	5000	1	2	3
B	2000	1	2	3
C	1000	1	2	3

D22 	In the last 12 months, did it ever happen that Your household could not pay some of the following payments on time?			
		YES	NO	IMPOSSIBLE TO ANSWER
A	Rent of the rented dwelling excluding payments for public utilities and service charges <i>(NB! Owners of the dwelling and persons using the dwelling free of charge should answer "Impossible to answer")</i>	1	2	3
B	Interests on leasing or repayments of loan connected with housing	1	2	3
C	Payments for public utilities and service charges (heating, electricity, water, gas, maintenance, garbage collecting, etc.)	1	2	3
D	Interests on leasing or repayments of loan not connected with housing (e.g., study loan, small loan, car leasing, etc.)	1	2	3
<i>NB! Interests on leasing and repayments of loans taken for interior decoration, current repairs and purchase of new furniture should not be taken into account here.</i>				

D23 	In view of the average monthly net income of Your household, how do You cope? <i>NB! The net income includes all wages, pensions, benefits, allowances and supports (from which the income tax and allowances paid to other households have been deducted).</i>	
	1 We do not cope at all	4 We usually cope
	2 We cope with great difficulties	5 We cope well
	3 We cope with difficulties	6 We cope very well

D24	How large should the minimum monthly income of Your household be for You to make both ends meet? <i>In answering the present situation of the household and Your own insight of making both ends meet should be considered.</i>
	Minimum monthly net income needed in your household _____ kroons

D25	WHO ANSWERED TO THE HOUSEHOLD QUESTIONNAIRE? THE COLUMN NUMBER (BX1) OF THE PERSON WHO ANSWERED TO THE QUESTIONS IN THE HOUSEHOLD QUESTIONNAIRE _____
------------	--

SECTION E. PLANNED CHANGE OF RESIDENCE

E1	Does Your household plan to change the residence during the next year?
	1 YES
	2 NO → THE END OF THE HOUSEHOLD QUESTIONNAIRE, INTERVIEWER'S SECTION
	3 I DON'T KNOW → THE END OF THE HOUSEHOLD QUESTIONNAIRE, INTERVIEWER'S SECTION

E2	Do You know where exactly You plan to settle down?
A	1 I DON'T KNOW → E3 2 YES
B	Street/farm
C	House number |_|_|_|
D	Flat number |_|_|_|
E	Settlement/village
F	City/town/rural municipality
G	County
	→ THE END OF THE HOUSEHOLD QUESTIONNAIRE, INTERVIEWER'S SECTION
E3	Could You say a contact person from whom it would be possible to receive information about Your new contact details in case of need?
	1 YES
A	Name.....
B	Contact telephone |_|_|_|_|_|_|_|_|_|_|
C	Street/farm
D	House number |_|_|_|
E	Flat number |_|_|_|
F	Settlement/village
G	City/town/rural municipality
H	County
	2 I DON'T KNOW

INTERVIEWER'S SECTION (CONTINUATION)

A06	FINISHING TIME OF INTERVIEW	IN CASE OF INTERRUPTION, FINISHING TIME OF CONTINUATION
A	|_|_| HOUR	|_|_| HOUR
B	|_|_| MINUTES	|_|_| MINUTES
A07	LANGUAGE OF INTERVIEW 1 ESTONIAN 2 RUSSIAN	
A08	WHO ELSE WAS PRESENT AT THE INTERVIEW? [NOTE ALL PERSONS]	
A	1 NOBODY	
B	2 CHILDREN UNDER 6 YEARS	
C	3 CHILDREN AGED 6 AND OLDER	
D	4 SPOUSE (PARTNER)	
E	5 OTHER RELATIVES	
F	6 OTHER ADULTS (NON-RELATIVES)	
A09	THE INTERVIEW PROCEEDED...	
	1 VERY WELL	4 WITH DIFFICULTIES [EXPLAIN in A10]
	2 WELL	5 WITH GREAT DIFFICULTIES [EXPLAIN in A10]
	3 SATISFACTORILY	
A10	COMMENTS ABOUT THE INTERVIEW [WRITE ABOUT ALL DISTURBING FACTORS]	
	
	
	
	
	
	

AFTER YOU HAVE CHECKED THAT THE SEQUENCE OF QUESTIONS IN THE QUESTIONNAIRE HAS BEEN ADHERED TO AND ALL THE ANSWERS TO THESE QUESTIONS IN THIS SEQUENCE HAVE BEEN RECORDED, PLEASE CONFIRM IT WITH YOUR SIGNATURE.

..... SIGNATURE OF THE INTERVIEWER

|_|_| SENIOR INSTRUCTOR'S AREA QUESTIONNAIRE NUMBER |_|_|_|_|

|_|_| COUNTY



STATISTIKAAMET

ESTONIAN SOCIAL SURVEY 2005

Personal questionnaire

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SECTION D	Studies	3
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Modules:

SECTION V	Social origin	18
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Code of household |_|_|_|_|_| Household questionnaire BA5 |_|_|_|_|

Code of household member |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_| Column number (BX1)
|_|_|

Survey area |_|_|_|_|_| Code of interviewer |_|_|_|_|

Tallinn 2005




SECTION A. INTERVIEWER'S SECTION



A01	DATE OF INTERVIEW	DATE OF CONTINUATION
A	|_|_| DATE	|_|_| DATE
B	|_|_| MONTH	|_|_| MONTH
A02	STARTING TIME OF THE INTERVIEW	IN CASE OF INTERRUPTION, STARTING TIME OF CONTINUATION
A	|_|_| HOUR	|_|_| HOUR
B	|_|_| MINUTES	|_|_| MINUTES

SECTION S. BACKGROUND DATA



S01	When were You born?
A	Date |_|_|
B	Month |_|_|
C	Year |_|_|_|_|
S02	<p>INDICATE THE GENDER OF THE RESPONDENT</p> <p>1 MALE</p> <p>2 FEMALE</p> <p>CHECK THE DATA PRESENTED IN S01 AND S02 WITH HOUSEHOLD QUESTIONNAIRE (B02 AND B03).</p>

SECTION D. STUDIES

DA1	Do You study in an educational institution at the moment? 1 YES 2 NO → D12
D05 	At which educational level do You study? 01 1–6th grade → vocational education attained (D12) 02 7–9th grade → vocational education attained (D12) 03 10–12th grade → vocational education attained (D12) 04 Vocational education 07 Vocational secondary education after basic education 08 Vocational secondary education after secondary education 11 Professional higher education 17 Applied higher education 12 Diploma study 13 Bachelor's study 18 Integrated study 14 Master's study (incl. internship) 15 Doctor's study (incl. residentsip) 16 OTHER [RECORD]
DA2	Full name of the school
D06a	What is the subject of studies?.....
D12  	What is Your highest completed vocational, occupational or professional education? 01 No vocational, occupational or professional education → general education attained (D13) 02 Vocational education, study time less than 3 years 03 Vocational education, study time 3 years or more 04 Vocational education together with basic education 05 Vocational education together with secondary education 06 Vocational secondary education after basic education 07 Vocational secondary education after secondary education 08 Professional secondary / technical education after basic education 09 Professional secondary / technical education after secondary education 11 Applied higher education 10 Professional higher education 15 Diploma study (since 1992) 12 Bachelor's degree (incl. higher education until 1992) 13 Master's degree 14 Doctor's degree (candidate of sciences)
A	Year education was attained | | | |
DA3	Full name of the last school completed / / /
D06b	What was the subject of studies?..... ..... | | | |

D13   A	<p>What kind of education did You attain in the school of general education (or in any other educational establishment in the framework of the general education curriculum)?</p> <p>1 Secondary education 2 Basic education (uncompleted secondary education) 3 Primary education 4 No primary education → F01</p> <p>Year education was attained |_|_|_|_|</p>
--	---

SECTION G. EVERYDAY ACTIVITIES


F01  A	<p>How old were You when taking on the first regular job? <i>NB! The first regular job is a full- or part-time job, which lasted at least 6 months. Seasonal work, apprenticeship, participation in training should not be taken into account.</i></p> <p>1 |_|_| years old 2 Never had a regular job → G01</p>
F02 	<p>How many whole years have You been working since that time? <i>NB! The time spent on pregnancy and maternity leave should be included in the time worked, however, not the parental leave.</i></p> <p>Number of whole years |_|_|</p>

G.A. EVERYDAY ACTIVITIES IN THE PREVIOUS WEEK

The following questions refer to the previous week (the week preceding the survey week).





This is a week, which started on Monday (date) and ended on Sunday (date).


This is a week, which started on Monday (date) and ended on Sunday (date).

G01	During last week, did You work at least one hour and were paid for it? 1 YES → G13 2 NO																		
G02	During last week, were You employed in entrepreneurship, business activities, individual work, as a freelancer or as a registered entrepreneur and were earning a profit for it? 1 YES → G13 2 NO																		
G03	During last week, were You working without pay in a family enterprise or on a farm and were sharing a profit from it? 1 YES → G13 2 NO																		
G04	During last week, were You engaged in producing agricultural products for sale? 1 YES → G13 2 NO																		
G05	During last week, did You have a job, which You were absent from, or a business activity in which You were temporarily inactive? 1 YES 2 NO → G10																		
G06 	What was the reason why You were absent from work in the previous week? <table><tr><td>01 Vacation</td><td>07 Pregnancy or maternity leave</td><td>12 Strike, lockout</td></tr><tr><td>02 Lay-off</td><td>08 Parental leave</td><td>13 Shortage of orders or work</td></tr><tr><td>03 Public holidays</td><td>09 Need to take care of children</td><td>14 Repair, breakdown, shortage of materials or raw materials</td></tr><tr><td>04 Studies</td><td>10 Need to take care of other members of the family</td><td>15 Weather conditions</td></tr><tr><td>05 In-service training or retraining</td><td>11 Duty chart, work free season</td><td>16 OTHER [RECORD].....</td></tr><tr><td>06 Own illness or injury</td><td></td><td></td></tr></table>	01 Vacation	07 Pregnancy or maternity leave	12 Strike, lockout	02 Lay-off	08 Parental leave	13 Shortage of orders or work	03 Public holidays	09 Need to take care of children	14 Repair, breakdown, shortage of materials or raw materials	04 Studies	10 Need to take care of other members of the family	15 Weather conditions	05 In-service training or retraining	11 Duty chart, work free season	16 OTHER [RECORD].....	06 Own illness or injury		
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05 In-service training or retraining	11 Duty chart, work free season	16 OTHER [RECORD].....																	
06 Own illness or injury																			
G07	Are You sure that You can continue doing this job after the period of absence? 1 YES 2 NO → G10																		
G08	How long will You be temporarily absent from work (including the time You have already been absent from work and time You will still be absent)? 1 Up to 3 months → G13 2 More than 3 months																		
G09	Were You (partly) paid for the time You have been absent from the job? 1 YES → G13 2 NO																		


G10	During last week, were You engaged in building dwellings for yourself? 1 YES A Usual number of hours per week |__|__|__| 2 NO
G11	During last week, were You engaged in the production of agricultural products for yourself? 1 YES A Usual number of hours per week |__|__|__| 2 NO
G12	During last week, did You do voluntary work for which You received no payment and which resulted in the production of goods (e.g. building of dwellings, church or other objects)? <i>NB! Voluntary work the result of which is the provision of services (e.g. maintenance and cleaning work) should not be taken into account.</i> 1 YES A Usual number of hours per week |__|__|__| 2 NO CONTINUE G26

G.B. MAIN JOB


G13	What was Your main job in the previous week? A Full name of the employer (<u>enterprise/institution</u>) B Name of local unit
G14	What is the main economic activity of this <u>enterprise/institution</u>? .....|__|__| A What is the economic activity of the local unit? [RECORD IF DIFFERENT FROM THE MAIN ECONOMIC ACTIVITY] B .....|__|__|
G15 	How many employees are there in this <u>enterprise/institution/local unit</u> ? <i>NB! In case the economic activity of the subdivision is different from the main economic activity of the enterprise/institution, indicate the number of persons employed in the subdivision. The respondent should also be included in the number of employees.</i> 1 1 to 10 (specify) |__|__| 3 20 to 49 5 Does not know exactly but fewer than 11 2 11 to 19 4 50 or more 6 Does not know exactly but more than 10
G16	What is Your occupation? <i>What are Your work tasks?</i> .....|__|__|__|
G17 	Which of the following groups do You belong to? 1 Employee 2 Employer with employee(s), farmer with paid employees → G20 3 Sole proprietor, farmer without salaried labour force, freelancer → G20 4 Unpaid family worker → G20 5 OTHER [RECORD].....
G18	How many direct subordinates do You have? |__|__|__|
G19 	Under which type of agreement do You work? 1 Permanent job under a written contract (incl. work for a term of one year or over) 2 Temporary job under a written contract (for a term less than one year) 3 Job based on verbal contract 4 OTHER [RECORD].....
G20	How many hours per week do You usually do this job? <i>NB! Hours actually worked are taken into account here.</i> |__|__|__| hours
GB1 	Do You consider it possible that during next year You will loose Your present job? 1 Yes, certainly 2 Probably yes 3 Probably not 4 Certainly not 5 Hard to say


G22 	<p>If You were to loose Your present job, what do You think, would You be able to find a job respective to Your professional skills and experiences?</p> <p>1 Yes, certainly 2 Probably yes 3 Probably not 4 Certainly not 5 Hard to say</p>
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G.C. SECOND JOBS

G21	<p>Did You have any other job in addition to main job where You were working or were temporarily absent from last week?</p> <p>1 YES 2 NO → G23</p>								
G22	<p>How many hours do You usually spend on second jobs? <i>NB! Hours actually worked are taken into account here.</i></p> <p> _ _ _ hours</p>								
G23	<p>Do You work in Your main and second jobs altogether ... <i>NB! Hours actually worked are taken into account here.</i></p> <p>1 usually less than 30 hours per week? 2 usually 30 or more hours per week? → G25</p>								
G24 	<p>Please indicate the main reason why You work less than 30 hours per week?</p> <table border="0"> <tr> <td>1 Studies, in-service training or retraining</td> <td>7 At my work less than 30-hours work per week is considered a full-time job</td> </tr> <tr> <td>2 Own illness, injury or incapacity for work</td> <td></td> </tr> <tr> <td>3 I wish to work 30 or more hours per week, but I have not found suitable work</td> <td>5 Need to take care of children and/or other members of the family, need to take care of the household</td> </tr> <tr> <td>4 I do not wish to work more hours than that</td> <td>6 OTHER [RECORD].....</td> </tr> </table>	1 Studies, in-service training or retraining	7 At my work less than 30-hours work per week is considered a full-time job	2 Own illness, injury or incapacity for work		3 I wish to work 30 or more hours per week, but I have not found suitable work	5 Need to take care of children and/or other members of the family, need to take care of the household	4 I do not wish to work more hours than that	6 OTHER [RECORD].....
1 Studies, in-service training or retraining	7 At my work less than 30-hours work per week is considered a full-time job								
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4 I do not wish to work more hours than that	6 OTHER [RECORD].....								
G25 A	<p>Were You engaged in the previous week, besides Your main job, in building a dwelling for Your own use, producing agricultural products for Your own use and /or voluntary work for which You received no payment and the result of which was the production of goods (e.g. building of dwellings, church or other objects)?</p> <p>1 YES Usual number of hours per week _ _ _ </p> <p>2 NO CONTINUE G32</p>								

G.D. LAST JOB



G26	<p>Have You ever worked?</p> <p>1 YES 2 NO → G32</p>
G27 A B	<p>When did You last have a job?</p> <p>Year |_|_|_|_| Month |_|_|</p>
GD1	<p>What was the full name of the employer (<u>enterprise/institution</u>)?.....</p> <p>Name of local unit</p>
G28 A B	<p>What was the main economic activity of this <u>enterprise/institution</u>?.....|_|_|</p> <p>What was the economic activity of the local unit? [RECORD IF DIFFERENT FROM THE MAIN ECONOMIC ACTIVITY].....|_|_|</p>
G29	<p>What was Your occupation? <i>What were Your work tasks?</i></p> <p>.....|_|_|_|</p>
G30 	<p>Which of the following groups did You belong into?</p> <p>1 Employee 2 Employer with employee(s), farmer with paid employees → G31 3 Sole proprietor, farmer without salaried labour force, freelancer → G31 4 Unpaid family worker → G31 5 OTHER [RECORD].....</p>



GD2	How many employees were in Your direct subordination? |_|_|_|
GD3 	Under which type of agreement did You work? 1 Permanent job under a written contract (incl. work for a term of one year or over) 2 Temporary job under a written contract (for a term less than one year) 3 Job based on verbal contract 4 OTHER [RECORD].....
G31	How many hours per week did You usually work at this job? <i>NB! Hours actually worked are taken into account here.</i> |_|_|_| hours

G.E. JOB SEEKING

G32	Have You been seeking for a job in the last four weeks (incl. last week)? 1 YES 2 NO → GE1 <i>NB! Seeking a job also includes preparations for starting entrepreneurship / a farm and waiting for an earlier contracted job to start.</i>
G33	Let's presume that You are offered a job. Could You start working in the next two weeks? <i>NB! If the person is waiting for the previously contracted job to begin in the next three months, the answer should be YES.</i> 1 YES 2 NO
GE1	Since the last social survey interview (if did not participate, then during 12 last months), have You changed Your place of employment or terminated employment? 1 YES 2 NO → G34
GE2	What was the main reason for changing employment or terminating employment? (INDICATE ONLY ONE!) 1 I wanted or I was offered a better job / I wanted to start entrepreneurship myself 2 Termination of the temporary contract of employment 3 Due to the employer (removal or retiring earlier on employer's initiative, redundancy, liquidation/reorganization/going bankrupt/privatising of the enterprise/institution) 4 Termination of entrepreneurship/farming 5 Need to take care of children or other members of the family, incl. parental leave 6 Spouse's/partner's work necessitated a change of residence, marriage 7 OTHER [RECORD].....

G.F. SOCIO-ECONOMIC STATUS



G34 	Which of the following describes Your status best at this moment ? <i>NB! Absence from work due to pregnancy or maternity leave, illness, injury, etc. should be regarded as working. Also casual jobs are working!</i> <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;">01 Full-time employee</div> <div style="width: 50%;">05 Unemployed person</div> <div style="width: 50%;">02 Part-time employee</div> <div style="width: 50%;">06 Student (pupil)</div> <div style="width: 50%;">03 Full-time entrepreneur-employer, sole proprietor, farmer without paid employees, freelancer, unpaid family worker)</div> <div style="width: 50%;">07 Old-age pensioner</div> <div style="width: 50%;">04 Part-time entrepreneur-employer, sole proprietor, farmer without paid employees, freelancer, unpaid family worker</div> <div style="width: 50%;">08 Pensioner receiving pension for incapacity for work</div> <div style="width: 50%;">09 Homemaker, person on parental leave</div> <div style="width: 50%;">10 Conscript</div> <div style="width: 50%;">11 Imprisoned person</div> <div style="width: 50%;">12 OTHER [RECORD].....</div> </div>
GF1 	Compared to the previous Social Survey interview (if did not participate then during 12 last months), are there any changes in Your socio-economic status? 1 YES 2 NO → G35


GF2 	Which of the statuses listed above described You best before the last change ? <i>NB! Absence from work due to pregnancy or maternity leave, illness, injury, etc. should be regarded as working.</i> IF SELECTION <i>OTHER</i> (12) IS USED, ALSO AN EXPLANATION SHOULD BE ADDED! _ _ _																								
G35 	Which of the statuses listed above described You in general in every month of the previous calendar year ? <i>NB! Absence from work due to pregnancy or maternity leave, illness, injury, etc. should be regarded as working.</i> IF SELECTION <i>OTHER</i> (12) IS USED, ALSO AN EXPLANATION SHOULD BE ADDED! <table border="0"> <tr> <td>A January</td> <td> _ _ _ </td> <td>G July</td> <td> _ _ _ </td> </tr> <tr> <td>B February</td> <td> _ _ _ </td> <td>H August</td> <td> _ _ _ </td> </tr> <tr> <td>C March</td> <td> _ _ _ </td> <td>I September</td> <td> _ _ _ </td> </tr> <tr> <td>D April</td> <td> _ _ _ </td> <td>J October</td> <td> _ _ _ </td> </tr> <tr> <td>E May</td> <td> _ _ _ </td> <td>K November</td> <td> _ _ _ </td> </tr> <tr> <td>F June</td> <td> _ _ _ </td> <td>L December</td> <td> _ _ _ </td> </tr> </table>	A January	_ _ _	G July	_ _ _	B February	_ _ _	H August	_ _ _	C March	_ _ _	I September	_ _ _	D April	_ _ _	J October	_ _ _	E May	_ _ _	K November	_ _ _	F June	_ _ _	L December	_ _ _
A January	_ _ _	G July	_ _ _																						
B February	_ _ _	H August	_ _ _																						
C March	_ _ _	I September	_ _ _																						
D April	_ _ _	J October	_ _ _																						
E May	_ _ _	K November	_ _ _																						
F June	_ _ _	L December	_ _ _																						

SECTION H. INCOME


H.A. MONETARY INCOME FROM WAGE LABOUR

The following questions refer to the income received in the previous calendar year. This information is very important for the purposes of this survey as it allows analysing better the distribution of poverty and wealth in Estonia. We would like You to answer the following questions as honestly as possible. All the information given by You will be treated in a way that it cannot be directly related to You or Your household.

H01	Have You received income from wage labour during the previous calendar year? 1 YES 2 NO → H22 <i>NB! CHECK! H01 MUST BE 1, IF THE RESPONDENT HAS BEEN AN EMPLOYEE IN THE PREVIOUS CALENDAR YEAR (G35 = 1 OR 2)</i>									
H02	Would it be easier for You to indicate Your income received from wage labour for the whole previous year as... 1 average monthly wages or 2 total for the year? → H04									
H03 	Indicate the size of Your average monthly income received from wage labour in the previous calendar year. If You had a second job besides Your main job for which You also received remuneration, please try to remember also these amounts and take them into consideration. Please indicate the <table border="0"> <tr> <td>A</td> <td>average monthly gross wages (as total received from all jobs in the previous calendar year)</td> <td> _ _ _ _ _ _ _ kroons</td> </tr> <tr> <td>B</td> <td>average monthly net wages (as total received from all jobs in the previous calendar year)</td> <td> _ _ _ _ _ _ _ kroons</td> </tr> <tr> <td>C</td> <td>In how many months did You receive remuneration? Number of months</td> <td> _ _ </td> </tr> </table> CONTINUE → H05	A	average monthly gross wages (as total received from all jobs in the previous calendar year)	_ _ _ _ _ _ _ kroons	B	average monthly net wages (as total received from all jobs in the previous calendar year)	_ _ _ _ _ _ _ kroons	C	In how many months did You receive remuneration? Number of months	_ _
A	average monthly gross wages (as total received from all jobs in the previous calendar year)	_ _ _ _ _ _ _ kroons								
B	average monthly net wages (as total received from all jobs in the previous calendar year)	_ _ _ _ _ _ _ kroons								
C	In how many months did You receive remuneration? Number of months	_ _								
H04 	Indicate the size of Your annual income received from wage labour in the previous calendar year. If You had a second job besides Your main job for which You also received remuneration, please try to remember also these amounts and take them into consideration. Please indicate the <table border="0"> <tr> <td>A</td> <td>annual gross wages (as total received from all jobs in the previous calendar year)</td> <td> _ _ _ _ _ _ _ kroons</td> </tr> <tr> <td>B</td> <td>annual net wages (as total received from all jobs in the previous calendar year)</td> <td> _ _ _ _ _ _ _ kroons</td> </tr> <tr> <td>C</td> <td>In how many months did You receive remuneration? Number of months</td> <td> _ _ </td> </tr> </table>	A	annual gross wages (as total received from all jobs in the previous calendar year)	_ _ _ _ _ _ _ kroons	B	annual net wages (as total received from all jobs in the previous calendar year)	_ _ _ _ _ _ _ kroons	C	In how many months did You receive remuneration? Number of months	_ _
A	annual gross wages (as total received from all jobs in the previous calendar year)	_ _ _ _ _ _ _ kroons								
B	annual net wages (as total received from all jobs in the previous calendar year)	_ _ _ _ _ _ _ kroons								
C	In how many months did You receive remuneration? Number of months	_ _								

H05	Besides regular remuneration it is also possible to receive different additional remuneration. Try to remember whether You received any of the following payments in the previous calendar year?	
		YES NO
A	Vacation benefit	1 2
B	Christmas benefit	1 2
C	Other holiday payments and benefits	1 2
D	Additional remuneration, performance pay	1 2
E	Overtime remuneration	1 2
F	Substitution remuneration	1 2
G	Part of mission expenses, which was not spent and remained to You	1 2
H	Annual bonus	1 2
I	Monetary income received from distribution of profit	1 2
J	Income received from realisation of the option of shares received as remuneration	1 2
K	Commissions	1 2
L	Tips	1 2
M	Other payments [RECORD].....	1 2
IN CASE ALL WERE INDICATED 2 → H08		
H06	Did You include all these payments in the above-mentioned remuneration? 1 YES → H08 2 NO	
H07	Indicate the total amount of payments that had not been taken into consideration .	
A	Annual gross remuneration (as total received from all jobs)	|_|_|_|_|_|_| kroons
B	Annual net remuneration (as total received from all jobs)	|_|_|_|_|_|_| kroons


Try to remember whether and how much did You and/or Your employer make payments into pension funds and other insurance schemes in the previous calendar year!

H08	Did Your employer pay on Your wages in the previous calendar year...			
		Yes, to the full extent	Yes, but not to the full extent	Did not pay at all
A	State social security contribution (33%)	1	2	3
B	State unemployment insurance premium (1%)	1	2	3
C	Income tax (26%)	1	2	3
IF ANSWERED 1, 3 OR 4 → H10				
H09	Could You indicate the amount on which the employer paid the above-mentioned taxes?			
A	1 YES The amount on which the employer paid taxes in the previous year			|_|_|_|_|_|_| kroons
2 NO				
H10	Have You joined the 2nd pillar of pension insurance? 1 YES 2 NO → H18			
H11	Indicate the amount withheld from Your wages into the 2nd pillar of pension insurance (2%) in the previous calendar year. IF THE RESPONDENT JOINED RECENTLY AND DID NOT PAY LAST YEAR YET, THEN INDICATE 0! Payments made into the 2nd pillar of pension insurance			
|_|_|_|_|_|_| kroons				

H.B. INCOME IN KIND FROM WAGE LABOUR


The following questions refer to non-monetary income received from wage labour.

H18	Did the employer allow You to use a car, van or any other motor vehicle (e.g. motorcycle, moped, boat, tractor) also for private purposes in the previous calendar year? 1 YES 2 NO → H21	
H19	Please specify the type, make and year of production of this vehicle!	
A	Type of the vehicle (car, bus, etc.)	
B	Make of the vehicle (Nissan, Audi, etc.)	
C	Year of production of the vehicle |_|_|_|_|	

H20	How many months did You use this car in the previous calendar year? Number of months <input type="text"/> <input type="text"/> <input type="text"/>			
H21 	Did Your employer provided You with any of the following types of income in kind. If “yes”, then estimate their approximate value. <i>NB! Compensation of the work-related expenses should not be taken into account.</i>			
		YES	A. Approximate value in the previous calendar year	NO
A	Motor fuel compensated by employer	1	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> kroons	2
B	Use of public transportation compensated by employer	1	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> kroons	2
C	Food at work received free or at a reduced price	1	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> kroons	2
D	Use of office apartment for free			
E	or under favourable conditions (Mobile) phone or postal services compensated by employer	1	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> kroons	2
F	Health services compensated by employer	1	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> kroons	2
G	Training not related to work but compensated by employer	1	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> kroons	2
H	Sporting possibilities free of charge or at reduced prices	1	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> kroons	2
I	Holiday trip paid by employer	1	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> kroons	2
J	Foodstuffs	1	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> kroons	2
K	Leasing or loan at reduced interest rate	1	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> kroons	2
L	Use of equipment and/or other tools (e.g. power saw, lawnmower, etc.)	1	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> kroons	2
M	OTHER [RECORD].....	1	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> kroons	2

H.C. INCOME RECEIVED FROM REGISTERED SELF-EMPLOYMENT

H22	Did You act in the previous calendar year as a sole proprietor? <i>NB! Income received from any other registered enterprise (private limited company, general partnership, limited partnership, commercial association, public limited company) should be recorded as proprietary income H49 C.</i> 1 YES 2 NO → H34	
H23	Besides you, were any other members of Your household engaged in this enterprise? 1 YES 2 NO → H26	
H24	Who can provide information relating to this enterprise best? You or any other member of the household? 1 I CAN → H26 2 ANOTHER MEMBER OF THE HOUSEHOLD	
H25	Please give the name of this household member .....year of birth <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> CHECK THAT THE MENTIONED HOUSEHOLD MEMBER HAS BEEN INTERVIEWED AND ANSWERS TO QUESTIONS IN THIS SECTION HAVE BEEN RECORDED, THEN CONTINUE WITH → H34	
H26	Specify for which reporting period did You present Your last income tax return? Starting from: Until: A date <input type="text"/> <input type="text"/> D date <input type="text"/> <input type="text"/> B month <input type="text"/> <input type="text"/> E month <input type="text"/> <input type="text"/> C year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> F year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
H27	Did You make loss or profit in the last reporting period? 1 Profit → H28 A 2 Loss, specify the amount <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> kroons → H30	
H28	Please specify the profit received before taxation. Profit before taxation <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> kroons	
H29	How large was Your net profit received from enterprise in the last reporting period? Net profit (profit after taxation) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> kroons	
H30	Did You use the enterprise car, van or any other motor vehicle (e.g. motorcycle, moped, boat, tractor) for private purposes? 1 YES 2 NO → H33	
H31	Specify the type, make and year of production of this vehicle. A Type of the vehicle (car, bus, etc.) B Make of the vehicle (Nissan, Audi, etc.)	

C	Year of production of the vehicle |_|_|_|_|			
H32	How many months did You use this vehicle in the previous calendar year? Number of months |_|_|			
H33 	Did You as an entrepreneur use the following types of income in kind from self-employment (by including them into enterprise expenses) in the previous calendar year. If YES, then estimate their approximate value. <i>NB! Compensation of the work-related expenses should not be taken into account!</i>			
		YES	A. Approximate value in the previous calendar year	NO
A	Assets taken into own use	1	|_|_|_|_| kroons	2
B	Motor fuel compensation by enterprise	1	|_|_|_|_| kroons	2
C	Use of public transportation compensated by enterprise	1	|_|_|_|_| kroons	2
D	Food at work received free or at a reduced price	1	|_|_|_|_| kroons	2
E	Use of apartment for free or under favourable conditions	1	|_|_|_|_| kroons	2
F	(Mobile) phone or postal services compensated by enterprise	1	|_|_|_|_| kroons	2
G	Health services compensated by enterprise	1	|_|_|_|_| kroons	2
H	Training not related to work but compensated by enterprise	1	|_|_|_|_| kroons	2
I	Sporting possibilities provided by enterprise free of charge or at reduced prices	1	|_|_|_|_| kroons	2
J	Holiday trip paid by enterprise	1	|_|_|_|_| kroons	2
K	Foodstuffs	1	|_|_|_|_| kroons	2
L	Use of equipment and/or other tools (e.g. power saw, lawnmower, etc.)	1	|_|_|_|_| kroons	2
M	OTHER [RECORD].....	1	|_|_|_|_| kroons	2
H34	Did You receive in the previous calendar year royalties, remuneration or payment under contract for creative or scientific work (articles, research work, etc.)? 1 YES 2 NO → H36			
H35	How large was Your income received in the previous calendar year for creative or scientific work!			
A	Gross income in the previous calendar year		|_|_|_|_| kroons	
B	Net income in the previous calendar year		|_|_|_|_| kroons	
C	How many months did You receive this income? Number of months		|_|	
H36	INTERVIEWER CHECKPOINT IN THE PREVIOUS YEAR, THE RESPONDENT WAS ENGAGED IN REGISTERED SELF-EMPLOYMENT AND GAVE INFORMATION ABOUT THAT (see H24 = 1) OR RECEIVED INCOME FOR CREATIVE OR SCIENTIFIC WORK (see H34 = 1)? 1 YES 2 NO → H46			

Try to remember if and how much did You make payments into insurance schemes in the previous calendar year.

H37	Did You pay for yourself in the previous calendar year...			
		YES	A. Amount paid in the previous calendar year	NO
A	social insurance tax (33%)?	1	|_|_|_|_| kroons	2
B	unemployment insurance premium (1%)?	1	|_|_|_|_| kroons	2
H38	Have You joined the 2nd pillar of pension insurance? 1 YES 2 NO → H46			
H39	Specify the amount of payments made into the 2nd pillar of pension insurance in the previous calendar year. IF THE RESPONDENT JOINED RECENTLY AND DID NOT PAY LAST YEAR YET, THEN PUT 0! Payments made into the 2nd pillar of pension insurance |_|_|_|_| kroons			

H.D. INCOME FROM UNREGISTERED SELF-EMPLOYMENT

The following questions refer to unregistered enterprise. Try to remember how much **income You by yourself received** from unregistered enterprise. If several household members are connected to it, **please divide the received income between the members** respectively to the contribution.

IF THE INCOME IS DIVIDED BETWEEN THE MEMBERS, CHECK IF ALL THE MEMBERS HAVE GIVEN ANSWERS TO THIS SECTION.

H46	Did You receive monetary income from the following activities in the previous calendar year?			
		YES	A. Income received in the previous calendar year	NO
A	Private provision of fee-charging services to other persons or households (e.g. baby-sitting, domestic help, fieldwork, etc.)	1	|_|_|_|_|_|_|_| kroons	2
B	Income from the sale of own-produced consumer goods (e.g. handicrafts, souvenirs, etc.)	1	|_|_|_|_|_|_|_| kroons	2
C	Income from the sale of own-produced foodstuffs (e.g. pies, waffles, shashlik, etc.)	1	|_|_|_|_|_|_|_| kroons	2
D	Income from intermediate commercial transactions	1	|_|_|_|_|_|_|_| kroons	2
E	Income from agricultural or forestry activities (e.g. income received from the sale of horticultural or agricultural products, live animals and poultry, livestock and poultry-farming products, bee-keeping products, timber, etc.)	1	|_|_|_|_|_|_|_| kroons	2
F	OTHER [RECORD].....	1	|_|_|_|_|_|_|_| kroons	2
H47	Did You receive income in kind from unregistered enterprise in the previous calendar year (e.g. fuel received for transport of hay, firewood received for forest felling, etc.)? <i>NB! Production costs should be excluded from income!</i>			
	YES	[RECORD]	A. Approximate value in the previous calendar year	NO
A	1	.....	|_|_|_|_|_|_|_| kroons	2
B	1	.....	|_|_|_|_|_|_|_| kroons	2
C	1	.....	|_|_|_|_|_|_|_| kroons	2
H48	Products for own consumption have been listed below. If You answer YES, then try to estimate their approximate value in the previous calendar year. <i>NB! Production costs should be excluded from income!</i>			
		YES	A. Approximate value in the previous calendar year	NO
A	Construction of dwellings	1	|_|_|_|_|_|_|_| kroons	2
B	Agricultural activities	1	|_|_|_|_|_|_|_| kroons	2
C	Forestry work	1	|_|_|_|_|_|_|_| kroons	2
D	OTHER [RECORD].....	1	|_|_|_|_|_|_|_| kroons	2

H.E. PROPERTY INCOME

The following questions refer to property income received in the previous calendar year. If You were engaged in registered enterprise (except sole proprietor): private limited company, general partnership, limited partnership, commercial association, public limited company and took out the earned profit, then indicate here the received income.

H49	Did You receive any of the following income in the previous calendar year? <i>Indicate gross income!</i>			
		YES	A. Amount in the previous calendar year	NO
A	Interest income from deposits (deposit rate in bank)	1	|_|_|_|_|_|_|_| kroons	2
B	Interest income from securities (shares, bonds)	1	|_|_|_|_|_|_|_| kroons	2
C	Dividend income from securities (i.e. shares, bonds)	1	|_|_|_|_|_|_|_| kroons	2
E	OTHER [RECORD].....	1	|_|_|_|_|_|_|_| kroons	2
IF EVERYTHING WAS ANSWERED 2 → HK1				


H50	What was the amount of taxes that You paid on Your income in the previous calendar year? Income tax paid on property income in the previous calendar year _ _ _ _ _ _ _ kroons
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H.K. INSURANCE

HK1	Have You joined the 3rd pillar of pension insurance? 1 YES 2 NO → HK3	
HK2	Please specify the amount You paid into the 3rd pillar of pension insurance in the previous calendar year. Payments made into the 3rd pillar of pension insurance |_|_|_|_|_|_|_| kroons	
HK3	Did You receive payments from the 3 rd pillar of pension insurance in the previous calendar year? 1 YES	
A	The received amount in the previous calendar year	|_|_|_|_|_|_|_| kroons
B	The income tax paid	|_|_|_|_|_|_|_| kroons
	2 NO	
HK4	Have You insured yourself and joined any other collecting insurance scheme? 1 YES 2 NO → HK6	
HK5	How much did You pay for Your collecting insurance in the previous calendar year? Payments made for the collecting insurance in the previous year |_|_|_|_|_|_|_| kroons	
HK6	Did You receive payments from collecting insurance in the previous calendar year? 1 YES	
A	The received amount in the previous calendar year	|_|_|_|_|_|_|_| kroons
B	The paid income tax	|_|_|_|_|_|_|_| kroons
	2 NO	
HK7	Have You concluded any additional insurance contracts and make payments into other private insurance schemes (e.g. health insurance, life insurance, etc., except collecting insurance)? 1 YES 2 NO → HK9	
HK8	Specify the amount You paid for Your additional insurance in the previous calendar year? Payments made for the additional insurance in the previous year |_|_|_|_|_|_|_| kroons	
HK9	Has Your employer insured You or have You insured yourself via the enterprise and make payments into other private insurance schemes (e.g. health insurance, life insurance, etc.)? 1 YES 2 NO → SECTION H. F. TRANSFERS	
HK10	How much has been paid for the additional insurance in the previous calendar year? Payments made in the previous calendar year |_|_|_|_|_|_|_| kroons	

H.F. TRANSFERS

H51	Did You receive old-age pension or any other benefits relating to old-age (incl. disability allowance for the pension-aged) (national pension, special pension, lump-sum benefit paid by the employer upon retirement, payments received from the 2nd pillar of pension insurance or other compulsory insurance schemes, etc.) in the previous calendar year? 1 YES	
A	The amount received in the previous calendar year	|_|_|_|_|_|_|_| kroons
B	How many months did You receive it?	|_|_|
	2 NO	
H52	Did You receive pension for incapacity for work or any other benefits relating to disability (disabled child allowance, disability allowance for a person not less than 16 years of age, education allowance for a disabled person, caregiver's allowance, etc.) in the previous calendar year? 1 YES	
A	The amount received in the previous calendar year	|_|_|_|_|_|_|_| kroons
B	How many months did You receive it?	|_|_|
	2 NO	





H53	Did You receive survivor's pension or any other benefits relating to the loss of a provider in the previous calendar year?			
	1 YES			
A	The amount received in the previous calendar year		|_|_|_|_|_|_| kroons	
B	How many months did You receive it?		|_|_|	
	2 NO			
H54	Did You receive sickness benefits or any other benefits relating to health (compensatory allowance granted upon injury received at work or upon occupational accident, care allowance, etc.), except pregnancy and maternity benefit (household questionnaire D11), in the previous calendar year? THIS BENEFIT MAY BE RECEIVED ONLY BY THE PERSON WHO WORKS AT THAT TIME (see G35)			
	1 YES			
A	The amount received in the previous calendar year		|_|_|_|_|_|_| kroons	
B	How many days did You receive it?		|_|_|_|	
	2 NO			
H55	Did You receive unemployment benefit or any other benefits relating to unemployment (labour market related early retirement benefit, remuneration of persons participating in community placements, etc.), except redundancy payment , in the previous calendar year?			
	1 YES			
A	The amount received in the previous calendar year		|_|_|_|_|_|_| kroons	
B	How many months did You receive it?		|_|_|	
	2 NO			
H56	Did You receive labour market support to start a business in the previous year?			
	1 YES			
A	The amount received in the previous calendar year		|_|_|_|_|_|_| kroons	
	2 NO			
HF1	Did You receive redundancy payment in 2003 and/or 2004?			
	1 YES		The amount received |_|_|_|_|_|_| kroons	
	2 NO → NEXT PAGE (H 57)			
HF2	How much of the received redundancy payment did You use in the previous calendar year?			
A	1 |_|_|_|_|_|_| kroons → NEXT QUESTION (H57)			
B	2 I DON'T KNOW			
C	When did You receive that amount?		|_|_|_|_| year |_|_| month	
D	How many monthly salaries was this payment equal to? Number of months		|_|_|	
H57	Did You receive any education-related benefits in the previous year?			
	YES	A. Amount received in the previous calendar year	NO	
A	State stipend	1 |_|_|_|_|_|_| kroons	2	
B	Scholarship or grant awarded by a fund or organisation locating in Estonia	1 |_|_|_|_|_|_| kroons	2	
C	Scholarship or grant awarded by a foreign state	1 |_|_|_|_|_|_| kroons	2	
D	Student loan written-off to a certain extent	1 |_|_|_|_|_|_| kroons	2	
G	Education allowance	1 |_|_|_|_|_|_| kroons	2	
H	OTHER [RECORD]	1 |_|_|_|_|_|_| kroons	2	
H58	Did You receive in the previous calendar year any other support/benefit/pension not mentioned above (support upon release from custodial institution, compensation paid to a victim of a criminal offence, starting in life allowance for an orphan, etc.)?			
	YES	[RECORD]	A. Amount received in the previous calendar year	NO
A	1	.....	|_|_|_|_|_|_| kroons	2
B	1	.....	|_|_|_|_|_|_| kroons	2

H.G. TAXES ON INCOME

H59	<p>Did You pay an additional amount of tax due to be paid on the income received in 2003 (an additional amount of tax was made in 2004)?</p> <p>1 YES 2 NO → H64</p>
H60	<p>Who paid the additional amount of income tax and for whom?</p> <p>1 I paid the additional amount of income tax only for myself → H63 2 I paid the additional amount of income tax both for myself and for other members of the household → H62 3 The additional amount of income tax was paid by another member of the household both for himself or herself as well as for me</p>
H61	<p>Please specify the name of the member of the household who paid the additional amount of income tax for you.</p> <p>A Name Year of birth | | | | |</p> <p>CONTINUE → H64</p>
H62	<p>Please specify the name(s) of this (these) household member(s) for whom You paid the additional amount of income tax.</p> <p>A Name..... Year of birth | | | | |</p> <p>B Name..... Year of birth | | | | |</p> <p>C Name..... Year of birth | | | | |</p>
H63	<p>What was the amount of the additional amount of tax paid on Your income in the previous calendar year?</p> <p>Additional amount of tax paid on income in the previous calendar year | | | | | kroons</p>
H64	<p>Did You receive income tax return for the 2003 income (income tax return was received in 2004) (regarding the loan interests, education costs, bigger tax-free minimum)? <i>NB! Income tax return for the education costs and interests on student loan should be included here.</i></p> <p>1 YES A Income tax return for the income received in the previous year | | | | | kroons 2 NO</p>

SECTION I. HEALTH

I01	<p>What is Your general assessment of Your health?</p> <p>1 Very good 3 Neither good nor bad 2 Good 4 Bad 5 Very bad</p>
I02	<p>Do You have any long-term (chronic) illness or health problem? <i>NB! Seasonal (e.g. hay fever) or recurrent health problems should also be considered as long-term.</i> ALWAYS ASK, IRRESPECTIVE OF THE PREVIOUS ANSWER!</p> <p>1 YES 2 NO</p>


I03 	Has any health problem restricted the performance of Your everyday activities over a long time (at least in the last 6 months)? ALWAYS ASK, IRRESPECTIVE OF THE PREVIOUS ANSWERS!			
		Yes, very much	Yes, to some extent	No, not at all
A	Work and studies (incl. commencement or continuation of in-service training or retraining)	1	2	3
B	Moving around at home or outside of home (incl. use of public transport)	1	2	3
C	Communication and recreation (incl. visiting clubs or other institutions)	1	2	3
<i>NB! If the health problem is seasonal or recurrent, then the previous year should be born in mind. If the health problem has appeared only recently, then the next year should be born in mind.</i>				
I04	Have You been in a situation in the previous 12 months where You needed to consult or get help from Your family doctor but did not get help or consultation? 1 YES 2 NO → I06			
I05 	What was the main reason why You could not consult or get help from Your family physician ? ONLY ONE SELECTION! 01 I could not afford it for economic reasons 06 Too far, transport problems 02 I had no time due to work, taking care of children or others 07 Too long waiting list 03 I was afraid (of a doctor, hospital, examination, treatment) 08 I did not have a valid health insurance 04 I did not know any good doctor who I could see 09 I did not have a referral 05 I wanted to wait and see if the health problem would disappear by itself 10 Other reason [RECORD]			
I06	Have You been in a situation in the previous 12 months where You needed to consult or get help from Your dentist but did not get help or consultation? <i>NB! Orthodontists and prostheses specialists (doctors) should also be taken into account here.</i> 1 YES 2 NO → I08			
I07 	What was the main reason why You could not consult or get help from Your dentist? ONLY ONE SELECTION! 01 I could not afford it for economic reasons 06 Too far, transport problems 02 I had no time due to work, taking care of children or others 07 Too long waiting list 03 I was afraid (of a doctor, hospital, examination, treatment) 08 I did not have a valid health insurance 04 I did not know any good doctor who I could see 09 I did not have a referral 05 I wanted to wait and see if the health problem would disappear by itself 10 Other reason [RECORD]			
I08	Have You been in a situation in the previous 12 months where You needed to consult or get help from a medical specialist but did not get help or consultation? 1 YES 2 NO → I10			
I09 	What was the main reason why You could not consult or get help from a medical specialist? ONLY ONE SELECTION! 01 I could not afford it for economic reasons 06 Too far, transport problems 02 I had no time due to work, taking care of children or others 07 Too long waiting list 03 I was afraid (of a doctor, hospital, examination, treatment) 08 I did not have a valid health insurance 04 I did not know any good doctor who I could see 09 I did not have a referral 05 I wanted to wait and see if the health problem would disappear by itself 10 Other reason [RECORD]			
I10	How tall are you? |_|_|_| cm			
I11	What is Your weight? _ _ _ kg			

SECTION V. SOCIAL ORIGIN

Household members 20 to 70-years (as at 1 January 2005) answer the questions of section V.


VX	<p>Into which group of age does the respondent belong to?</p> <p>1 younger than 20-year-old (born in 1986 or later) → SECTION N</p> <p>2 20 to 70-year-old (born in 1935 to 1985) → V01</p> <p>3 over 70-year-old (born before 1935) → SECTION T</p>
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We ask You to remind the time when You **were in early teens, i.e. 12-16-year-old**. If there were any changes during this period, then choose the situation which lasted the longest.



V01	Which of the following persons belonged to Your household in the early teens (12-16-year-old)?		
		YES	NO
A	Mother (exc. foster mother)	1	2
B	Father (exc. foster father)	1	2
C	Mother's new partner/husband	1	2
D	Father's new partner/wife	1	2
E	Sister (incl. foster sister)	1	How many: <input type="text"/> 2
F	Brother (incl. foster brother)	1	How many: <input type="text"/> 2
G	Other relatives	1	2
H	Who?		
I	Other non-relatives	1	2
	Who?		
I	I lived in the orphanage, care home or some other institution	1	2



Now let's speak about people who raised You when You were 12-16-year-old (mother and father or foster parents).


DATA ABOUT (FOSTER) PARENTS IN TABLE V01 AND IN THE FOLLOWING TABLE MUST MATCH.



↓		Father (also foster father)	Mother (also foster mother)	
V02	What is ...'s year of birth: IF ... WAS NOT IN THE HOUSEHOLD, 0000	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	0 → V09
V03	What is ...'s country of birth (according to the present administrative division)? <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
V04	What is nationality of ...? 1 Estonian 2 Russian 3 OTHER [RECORD]	<input type="text"/>	<input type="text"/>	
V05 	What level of education had ... attained in the school of general education by the time You were in early teens (12-16-year-old)? 1 No primary education 2 Primary education 3 Basic education (uncompleted secondary education) 4 Secondary education	<input type="text"/>	<input type="text"/>	

N06 	At which educational level did You study and completed the studies? 01 1–6th grade 02 7–9th grade 03 10–12th grade 04 Vocational education 05 Vocational education together with basic education 06 Vocational education together with secondary education 07 Vocational secondary education after basic education 08 Vocational secondary education after secondary education 09 Professional secondary education after basic education 10 Professional secondary education after secondary education 11 Applied higher education 12 Professional higher education 13 Diploma study 14 Bachelor's study 15 Integrated bachelor's and master's study 16 Master's study 17 Doctor's study 18 OTHER [RECORD]	<div> <div> <div></div> <div></div> </div> <div>.....</div> <div>.....</div> <div>.....</div> </div>	<div> <div> <div></div> <div></div> </div> <div>.....</div> <div>.....</div> <div>.....</div> </div>	<div> <div> <div></div> <div></div> </div> <div>.....</div> <div>.....</div> <div>.....</div> </div>	
N07 A B	When did You start learning there? <div> <div>Year</div> <div>Month</div> </div>	<div> <div> <div></div> <div></div> <div></div> <div></div> </div> <div> <div></div> <div></div> </div> </div>	<div> <div> <div></div> <div></div> <div></div> <div></div> </div> <div> <div></div> <div></div> </div> </div>	<div> <div> <div></div> <div></div> <div></div> <div></div> </div> <div> <div></div> <div></div> </div> </div>	
N08	What was the subject of studies? (in case of the studies of general education may leave blank)	<div> <div>.....</div> <div>.....</div> <div>.....</div> <div> <div></div> <div></div> </div> </div>	<div> <div>.....</div> <div>.....</div> <div>.....</div> <div> <div></div> <div></div> </div> </div>	<div> <div>.....</div> <div>.....</div> <div>.....</div> <div> <div></div> <div></div> </div> </div>	
N09	Did You work at the time of Your studies (at least 6 months and 20 hours per week)? 1 YES 2 NO	<div> <div> <div></div> </div> </div>	<div> <div> <div></div> </div> </div>	<div> <div> <div></div> </div> </div>	2 → N13
N10	What was the connection between the subject being studied and the job? 1 I did not acquire any profession at the educational institution (I studied at the school of general education) 2 I worked at the same profession 3 I worked at the similar profession 4 I worked at the other profession	<div> <div> <div></div> </div> </div>	<div> <div> <div></div> </div> </div>	<div> <div> <div></div> </div> </div>	1,2,3 → N12


N11 	Why did You not work on a job corresponding to your profession? (Up to 3 reasons may be indicated) 1 I did not find a job corresponding to my profession 2 There was no job corresponding to my profession near the place of residence (place of studies) 3 The level of wages of the job corresponding to my profession was not sufficient 4 The job corresponding to my profession did not suit 5 The job corresponding to my profession was not interesting 6 OTHER [RECORD]	<div style="text-align: center;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div>	<div style="text-align: center;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div>	<div style="text-align: center;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div>	
N12	Did You continue after <u>completion</u> of the studies working in the job where You worked already during the studies (at least 6 months and 20 hours per week in addition)? 1 YES 2 NO	<div style="text-align: center;"> <input type="checkbox"/> </div>	<div style="text-align: center;"> <input type="checkbox"/> </div>	<div style="text-align: center;"> <input type="checkbox"/> </div>	1 → N19
N13	Did You start working after <u>completion</u> of the studies (at least 6 months and 20 hours per week)? 1 YES 2 NO	<div style="text-align: center;"> <input type="checkbox"/> </div>	<div style="text-align: center;"> <input type="checkbox"/> </div>	<div style="text-align: center;"> <input type="checkbox"/> </div>	1 → N17
N14	Did You seek for a job after <u>completion</u> of the studies? 1 YES 2 NO	<div style="text-align: center;"> <input type="checkbox"/> </div>	<div style="text-align: center;"> <input type="checkbox"/> </div>	<div style="text-align: center;"> <input type="checkbox"/> </div>	2 → N34
N15	How many months did You seek for a job? Number of months	<div style="text-align: center;"> <input type="text"/> </div>	<div style="text-align: center;"> <input type="text"/> </div>	<div style="text-align: center;"> <input type="text"/> </div>	
N16 	Through which channels did You seek for a job? 1 Through relatives or acquaintances 2 By approaching the employer directly 3 Through job advertisements 4 Through state employment office 5 Through staff seeking firms 6 Through job-wanted advertisement set up by oneself 7 OTHER [RECORD]	<div style="text-align: center;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div>	<div style="text-align: center;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div>	<div style="text-align: center;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div>	→ N34
N17	What was the connection between the subject being studied at the educational institution and the job? 1 I did not acquire any profession at the educational institution (I studied at the school of general education) 2 I worked at the same profession 3 I worked at the similar profession 4 I worked at the different profession	<div style="text-align: center;"> <input type="checkbox"/> </div>	<div style="text-align: center;"> <input type="checkbox"/> </div>	<div style="text-align: center;"> <input type="checkbox"/> </div>	1,2,3 → N19





N25 A	What was the main economic activity of this <u>enterprise/institution</u> ? □□ □□ □□	
B	What was the economic activity of the local unit? [RECORD IF DIFFERENT FROM THE MAIN ECONOMIC ACTIVITY] □□ □□ □□	
N26 	Who was the owner of this <u>enterprise/institution</u> ? 10 The state (Republic of Estonia) 20 Local authority 30 Estonian private person 40 Foreign private person 50 Estonian and/or foreign private person 90 OTHER [RECORD] □□ □□ □□	
N27	What was Your occupation at starting this job? What were Your work tasks? □□□ □□□ □□□	
N28  A B C D E F G H I	I will present You some questions about the satisfaction with this work. Please answer with the variants: 1 – I was not satisfied at all 2 – I was not satisfied 3 – I was neither satisfied nor unsatisfied 4 – I was satisfied 5 – I was very satisfied To what extent were You satisfied...? with this work in general with the work tasks with the collective with the superiors with the work environment with wages with the work location with the work schedule with the training possibilities	..... ..... ..... ..... ..... ..... ..... ..... ..... .....	..... ..... ..... ..... ..... ..... ..... ..... ..... .....	..... ..... ..... ..... ..... ..... ..... ..... ..... .....
N29	Did the job and Your education correspond with each other? 1 YES 2 NO, the job required higher level of education 3 NO, the job required lower level of education	..... ..... ..... .....	..... ..... ..... .....	..... ..... ..... .....
N30	Are You working in this <u>enterprise/institution</u> until now? 1 YES 2 NO	..... .....	..... .....	..... .....	2 → N32
N31	Are You working at the same job at the moment where You started after the completion of studies? 1 YES 2 NO	..... .....	..... .....	..... .....	→ N34




N32	When did You leave this <u>enterprise/institution</u> ?				
A	Year	|_|_|_|_|	|_|_|_|_|	|_|_|_|_|	
B	Month	|_|	|_|	|_|	
N33	What was the reason why You left that job?				
	01 I wanted/I was offered higher wages	|_|_|	|_|_|	|_|_|	
	02 I wanted/I was offered more favourable working conditions				
	03 I wanted/I was offered more interesting job				
	04 Enterprise/institution was liquidated				
	05 Enterprise/institution was reorganized				
	06 Enterprise/institution went bankrupt	.....	.....	.....
	07 I was made redundant	.....	.....	.....
	08 I was removed on employer's initiative	.....	.....	.....
	09 Temporal contract of employment terminated	.....	.....	.....
	10 I wanted to start entrepreneurship myself	.....	.....	.....
	11 Change of residence				
	12 Parental leave				
	13 Going to military service				
	14 Started to study				
	15 OTHER [WRITE INTO THE TABLE]				
N34	Have You completed any more studies during the last 10 years after which You did not continue studying or continued the studies after more than a year? 1 YES 2 NO	|_|	|_|	|_|	1 → N04
N35	INTERVIEWER CHECKPOINT IS THE NUMBER OF COLUMNS FULFILLED IN THE TABLE EQUAL TO THE ANSWER OF QUESTION N03 (see p 19)? 1 YES 2 NO → CHECK STARTING FROM N03				
N36	Do You plan to start studying at some educational institution of the education system during next couple of years (except courses)? 1 Certainly 2 Maybe 3 Rather not → CONTINUE N38 4 Certainly not → CONTINUE N38				
N37	Where do You plan to continue the studies? 1 At the school of general education 2 At the vocational education institution 3 At the higher school, university 4 At the university on graduate level (master's study, doctor's study)				

N38 	To what extent do You agree to the following statements?	I agree completely	I agree partially	I rather do not agree	I do not agree at all
A	It is very important to me, that I have a job	1	2	3	4
B	If I had a lot of money, I would still like to go to work	1	2	3	4
C	I would feel useless, if I did not work	1	2	3	4
D	To be unemployed is absolutely unacceptable for me	1	2	3	4
E	I would prefer to work even then, when the unemployment benefit would be large	1	2	3	4
F	Work is one of the most important things in my life	1	2	3	4
N39 	Which (gross) wages do You think You are worth?				
	01 At least 3000 kroons				
	02 At least 5000 kroons				
	03 At least 7000 kroons				
	04 At least 10 000 kroons				
	05 At least 12 000 kroons				
	06 At least 15 000 kroons				
	07 At least 20 000 kroons				
	08 At least 25 000 kroons				

SECTION T. TRADE UNIONS AND COLLECTIVE AGREEMENTS

TY	STARTING TIME OF SURVEY
A	____ HOURS
B	____ MINUTES
T01	Did You work at some job in the previous week? 1 YES 2 NO → CONTINUE T09
T02 	Is there an organization representing the interests of workers (trade union) in Your enterprise? 1 YES 2 NO → T09 3 I DON'T KNOW → T09
T03	Which association of trade unions does it belong to?
T04	Are You a member of a trade union? 1 YES 2 NO → T08

T05 	Why did You join the trade union?	YES	NO
	1 It is better to defend the interests of workers collectively	1	2
	2 To develop the field of action of one's own field	1	2
	3 The wish to have more say in communicating with the employer	1	2
	4 To participate in drafting of the legal acts of one's own field	1	2
	5 OTHER [RECORD]	1	2
T06	Have the work conditions improved after founding the trade union or joining it? 1 YES 2 NO → T12 3 I DON'T KNOW → T12		
T07 	Has anything of the following improved?	YES	NO
	1 Income from the wage labour has increased	1	2
	2 Work environment	1	2
	3 Work safety and industrial hygiene	1	2
	4 Relations with the direction	1	2
	5 OTHER [RECORD]	1	2
	CONTINUE → T12		
T08 	Why don't You belong to the trade union?	YES	NO
	1 Lack of trust	1	2
	2 Trade union is not effective	1	2
	3 Trade union is an obsolete soviet organization	1	2
	4 I am afraid of a possible conflict with the employer or the employer doesn't allow	1	2
	5 OTHER [RECORD]	1	2
	CONTINUE → T12		
T09	If it were possible for You to join the trade union, would You join? 1 YES 2 NO → T11		
T10 	Why would You join the trade union?	YES	NO
	1 It is better to defend the interests of workers collectively	1	2
	2 To develop the field of action of one's own field	1	2
	3 The wish to have more say in communicating with the employer	1	2
	4 To participate in drafting of the legal acts of one's own field	1	2
	5 OTHER [RECORD]	1	2
	CONTINUE → T12		

T11 	Why would You not join the trade union?	YES	NO
	1 Lack of trust	1	2
	2 Trade union is not effective	1	2
	3 Trade union is an obsolete soviet organization	1	2
	4 I am afraid of a possible conflict with the employer or the employer doesn't allow	1	2
	5 OTHER [RECORD]	1	2
T12	Have there been concluded any collective agreements in Your enterprise?		
	1 YES		
	2 NO → T17		
	3 I DIDN'T WORK IN THE PREVIOUS WEEK → T17		
T13	Do You belong to any group of workers covered by the collective agreement?		
	1 YES		
	2 NO → CONTINUE T17		
T14 	Has anything of the following improved after concluding the collective agreement?	YES	NO
	1 Income from the wage labour has increased	1	2
	2 Work environment	1	2
	3 Work safety and industrial hygiene	1	2
	4 Relations with the direction	1	2
	5 OTHER [RECORD]	1	2
T15 	At what level has the collective agreement been concluded?		
	1 Enterprise		
	2 Branch of industry		
	3 Regional		
	4 National		
T16	For how many years has the collective agreement been concluded with You usually/on average during the last five years? For ____ years		
T17	In Your opinion, are trade unions or the concluded collective agreements effective from the worker's position and improve work conditions?		
	1 YES		
	2 NO		

FINAL SENTENCE: WE HAVE REACHED THE END OF THE SURVEY: THANK YOU VERY MUCH FOR YOUR COOPERATION!

INTERVIEWER'S SECTION (CONTINUATION)

A03	FINISHING TIME OF INTERVIEW A |_|_| HOURS B |_|_| MINUTES	IN CASE OF INTERRUPTION, FINISHING TIME OF CONTINUATION |_|_| HOURS |_|_| MINUTES
A04	LANGUAGE OF INTERVIEW 1 ESTONIAN 2 RUSSIAN	
A05	WHO ELSE WAS PRESENT AT THE INTERVIEW? [NOTE ALL PERSONS] A 1 NOBODY B 2 CHILDREN UNDER 6 YEARS C 3 CHILDREN AGED 6 AND OLDER D 4 SPOUSE (PARTNER) E 5 OTHER RELATIVES F 6 OTHER ADULTS (NON-RELATIVES)	
A06	THE INTERVIEW PROCEEDED... 1 VERY WELL 4 WITH DIFFICULTIES [EXPLAIN in A10] 2 WELL 5 WITH GREAT DIFFICULTIES [EXPLAIN in A10] 3 SATISFACTORILY	
A07	HOW WAS THE PERSONAL QUESTIONNAIRE COMPLETED? A 1 FACE-TO-FACE INTERVIEW B 2 TELEPHONE INTERVIEW C 3 THE RESPONDENT COMPLETED THE QUESTIONNAIRE HIMSELF/ HERSELF D 4 ANOTHER HOUSEHOLD MEMBER ANSWERED FOR THE RESPONDENT (<i>PROXY</i> INTERVIEW) MEMBER'S NUMBER WHO ANSWERED |_|_|_|_|_|_|_|_|_|_|_|_ E 5 OTHER, SPECIFY	
A08	DOES THE RESPONDENT LIVE SEPARATELY FROM HIS/HER HOUSEHOLD? 1 YES 2 NO	
A09	PLACE OF INTERVIEW 1 RESPONDENT'S PLACE OF RESIDENCE 2 RESPONDENT'S PLACE OF WORK 3 INTERVIEWER'S PLACE OF WORK / PLACE OF RESIDENCE 4 ELSEWHERE (WRITE WHERE)	
A10	COMMENTS ABOUT THE INTERVIEW [WRITE ABOUT ALL DISTURBING FACTORS]	

AFTER YOU HAVE CHECKED THAT THE SEQUENCE OF QUESTIONS IN THE QUESTIONNAIRE HAS BEEN ADHERED TO AND ALL THE ANSWERS TO THESE QUESTIONS IN THIS SEQUENCE HAVE BEEN RECORDED, PLEASE CONFIRM IT WITH YOUR SIGNATURE.

..... SIGNITURE OF THE INTERVIEWER